



2220

Social Functioning Scale (SFS)

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Interviewer:

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Site:

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Date

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This questionnaire helps us to learn how you have been recently. It takes about 20 minutes to complete. Before starting, could you please answer the following:

1. Where do you live?

2. Who do you live with?

	W	Inter	Ip	Ic	R	P	E/O
Raw Score							
Scaled Score							



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Social Functioning Scale (SFS)

Social Engagement/Withdrawal

1. What time do you get up each day?
- | | |
|---|---|
| <input type="radio"/> Before 9 AM | <input type="radio"/> Before 9 AM |
| <input type="radio"/> 9 AM - 11 AM | <input type="radio"/> 9 AM - 11 AM |
| <input type="radio"/> 11 AM - 1 PM | <input type="radio"/> 11 AM - 1 PM |
| Average Weekday <input type="radio"/> After 1 PM | Average Weekend <input type="radio"/> After 1 PM |
| <input type="radio"/> Missing | <input type="radio"/> Missing |
| <input type="radio"/> Not applicable | <input type="radio"/> Not applicable |

2. How many hours of the day do you spend alone (e.g., alone in a room, walking out alone, listening to radio or watching TV alone)?

- ☐ 0 - 3 hours alone very little time spent
☐ 3 - 6 hours alone some of the time
☐ 6 - 9 hours alone a lot of the time
☐ 9 - 12 hours alone a great deal of time
☐ more than 12 hours practically all the time
☐ Missing
☐ Not applicable

3. How often do you start a conversation at home?

- ☐ Almost never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

4. How often do you leave the house (for any reason)?

- ☐ Almost never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

5. How do you react to the presence of strangers?

- ☐ Avoid them ☐ Feel nervous ☐ Accept them ☐ Like them ☐ Missing ☐ Not applicable

Interpersonal Communication

1. How many friends do you have at the present time (people you see regularly, do activities with, etc.)?

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 99=missing
88=not applicable

2. Do you have a boyfriend/girlfriend (if not married)? ☐ Yes ☐ No ☐ Missing ☐ Not applicable



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3. How often are you able to carry out a sensible or logical conversation?

- ☐ Almost never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

4. How easy or difficult do you find it talking to people at the present time?

- ☐ Very or quite easy ☐ Average ☐ Quite difficult ☐ Very difficult ☐ Missing ☐ Not applicable

Independence - Performance

Indicate how often each of the following was done during the past 3 months

1. Buying items from stores without help

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

2. Washing dishes, cleaning up, etc.

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

3. Regular showering/bathing etc.

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

4. Washing own clothes

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

5. Looking for a job (if unemployed)

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

6. Doing the food shopping

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

7. Preparing and cooking a meal

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

8. Leaving the house alone

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

9. Using buses, trains, etc.

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

10. Using money

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

11. Budgeting

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

12. Choosing and buying clothes for self

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

13. Taking care of personal appearance

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable



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Recreation

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How often has the respondent done each of the following in the last 3 months:

1. Playing musical instruments

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

2. Sewing, knitting

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

3. Gardening

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

4. Reading

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

5. Watching television

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

6. Listening to CDs/tapes/radio

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

7. Cooking

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

8. Do It Yourself activities (e.g., plumbing, carpentry)

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

9. Fixing things (car, bike, household item)

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

10. Walking

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

11. Driving/biking (as recreation)

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

12. Swimming

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

13. Hobbies (e.g., collecting things)

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

14. Shopping

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable

15. Artistic activity (painting, crafts)

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable



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Prosocial

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How often has the respondent done each of the following in the last 3 months:

- | | | | | | | |
|---|-----------------------------|------------------------------|---------------------------------|-----------------------------|-------------------------------|--------------------------------------|
| 1 Movies | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 2 Theater/concert | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 3 Watching an indoor sport
(wrestling, basketball) | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 4 Watching an outdoor sport
(football, baseball) | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 5 Art gallery/museum | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 6 Exhibition/festival/fair | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 7 Visiting places of interest | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 8 Meetings/talks etc. (count
AA/NA meetings) | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 9 Attending class | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 10 Visiting relatives in
their homes | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 11 Being visited by relatives | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 12 Visiting friends (including
girlfriend/boyfriend) | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 13 Parties | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 14 Formal occasions | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 15 Dance club | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 16 Nightclub/social club | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 17 Playing an indoor sport | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 18 Playing an outdoor sport | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 19 Club/society | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 20 Bar | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 21 Eating out | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |
| 22 Church activity | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Missing | <input type="radio"/> Not applicable |



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Independence - Competence

How able are you to do each of the following activities?

1 Use public transportation

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

2 Handle money

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

3 Budget money

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

4 Cook for self

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

5 Do weekly shopping

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

6 Look for a job

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

7 Wash own clothes

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

8 Take care of personal hygiene

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

9 Wash, clean, etc.

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

10 Buy things from stores

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

11 Leave the house alone

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

12 Choose and buy clothes

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known

13 Care for personal appearance

☐ Able (does not need help) ☐ Able with some help ☐ Unable (needs much help) ☐ Not known



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Occupation / Employment

1. Are you currently working? (this includes job training courses/rehabilitation)

☐ Yes ☐ No ☐ Missing ☐ Not applicable

2. If Yes:

2a. What kind of work are you doing?

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2b. How many hours do you work each week?

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2c. How long have you had this job (months)

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3. If No:

3a. When did you last work (in months)?

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3b. What kind of job was it?

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3c. How many hours did you work each week?

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4. Do you collect payments for a physical or mental disability?

☐ Yes ☐ No ☐ Missing ☐ Not applicable

5. Are you currently in outpatient treatment (i.e., attend a hospital/treatment center as a day patient)?

☐ Yes ☐ No ☐ Missing ☐ Not applicable

6. Do you think that you are capable of some kind of employment/work?

☐ Definitely yes ☐ Would have difficulty ☐ Definitely no ☐ Missing ☐ Not applicable

7. How often do you make attempts to find a job (e.g., look in the newspaper, go to employment center)?

☐ Almost never ☐ Rarely ☐ Sometimes ☐ Often ☐ Missing ☐ Not applicable